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AMENDMENTS TO THE SPECIFICATION

Please replace paragraph [0004] with the following amended paragraph

[0004] Monitoring the ECG tracings from an intracardiac surgical device can be a useful tool to verify the position of the device in a heart. An electrode with reference to a ground or a pair of electrodes placed directly on or in the heart will record a repeating pattern of changes in electrical action potential. Action potential can be defined as an explosion of electrical activity that is created by a depolarizing current within biological cells. As action potentials spread from the top chambers of the heart (atria) to the bottom chambers of the heart (ventricles), the voltage measure between a single electrode and a ground or a pair of electrodes will vary in a way that provides a picture or electrocardiogram (also referred to as electrograms), of the electrical activity of the heart. The nature of this picture can be varied by changing the position of the recording electrode(s); different locations in the heart are known to have characteristic ECG tracings or measurements. A bipolar recording is the voltage measurement between two electrodes and a unipolar recording is the voltage measurement between a single electrode and an electrode that is attached to a patient or an electrode that is built into a recorder or electrocardiograph and maintained at zero potential (ground). J. A. Alvarez et al. (1991) who conducted experiments where ECG signals were monitored in a heart using a transseptal needle states that the endoatrial electrocardiogram registered while the needle (Brockenbrough transseptal needle) pressed muscular areas of the septum or the free atrial wall showed marked injury curves; on the other hand, no significant changes (in the endoatrial electrocardiogram) were observed at the area assumed to be the fossa ovalis floor, This implies that the ECG tracing observed when a surgical device is in contact with the fossa ovalis which is a membranous region will be markedly different from ECG tracing observed on the muscular areas of the atrial septum or the free atrial wall. This difference in the electrocardiogram may be used to locate a surgical device on the region of the fossa ovalis in a heart.